

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes☐ No

1. Article Addressed to:

KNOX320* 361172010 1506 12 10/12/06
NOTIFY SENDER OF NEW ADDRESS
:KNOX PEST CONTROL
1570 N EASTERN BLVD
MONTGOMERY AL 36117-2225



t for Merchandise

☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number (Copy fr

7004 1160 0003 5802 9855

102595-00-M-0952

PS Form 3811, July 1999

Domestic Return Receipt